

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A99000001628

1. Entity Name
MOR-SU INVESTMENTS, LTD.



Principal Place of Business
1655 DREXEL AVENUE, SUITE 207
MIAMI BEACH, FL 33139

Mailing Address
1655 DREXEL AVENUE, SUITE 207
MIAMI BEACH, FL 33139

DO NOT WRITE IN THIS SPACE

04182006 No Chg-LP CR2E003 (11/05)

4. FEI Number 65-0952587	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

RAPPORT, MORRIS
1655 DREXEL AVENUE, SUITE 207
MIAMI BEACH, FL 33139

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00**

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # P99000086538
NAME MOR-SU INVESTMENTS, INC.
STREET ADDRESS 1655 DREXEL AVENUE, SUITE 207
CITY-ST-ZIP MIAMI BEACH, FL 33139

U000000554197
05/15/06-80082-018 508.75

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IN THIS SPACE**

STAPLE CHECK HERE

DOCUMENT #	NAME
STREET ADDRESS	CITY-ST-ZIP
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DOCUMENT #	NAME
STREET ADDRESS	CITY-ST-ZIP
DOCUMENT #	NAME
STREET ADDRESS	CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *M. Rappon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/27/06

Date

Daytime Phone #